PART B - FEE(S) TRANSMITTAL Complete od sent this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 JUN 2 1 2004 (703) 746-4000 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed wh appropriate full further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless appropriate below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee neutrons. Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 24319 04/06/2004 7590 LSI LOGIC CORPORATION Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO, on the date indicated below. 1621 BARBER LANE MS: D-106 LEGAL MILPITAS, CA 95035 (Depositor's na Kashvap (Signat APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/068,768 02/06/2002 Matthew S. Von Thun 02-0003 1496.00201 9287 TITLE OF INVENTION: FIVE VOLT TOLERANT AND FAIL SAFE INPUT SCHEME USING SOURCE FOLLOWER CONFIGURATION APPLN. TYPE **SMALL ENTITY ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE \$1330 07/06/2004 nonprovisional NO \$1330 \$0 **EXAMINER** ART UNIT **CLASS-SUBCLASS** LE, DINH THANH 2816 327-437000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the CFR 1.363). 1Christopher P Maiorana PC names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Milpitas, California USA LSI Logic Corporation Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual XXcorporation or other private group entity ☐ governm 4b. Payment of Fee(s): XX Issue Fee A check in the amount of the fee(s) is enclosed. ☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. XXI The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 12-2252 (enclose an extra copy of this form). ☐ Advance Order - # of Copies _ Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. 92 (Authorized Signature) (Date) 43 331

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Sandeep Jaggi

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See 37 C.F.R. 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

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Complete if Known			
Application Number	10/068,768		
Filing Date	February-06, 2002		
First Named Inventor	Matthew Von Thun		
Group Art Unit	2816		
Examiner Name	Dinh Le		
Attorney Docket No.	1496.00201 / 02-0003		

METHOD OF PAYMENT (check one)	EEE CALCULATION (continued)					
METHOD OF PATMENT (CHeck one)	FEE CALCULATION (continued) 3. ADDITIONAL FEES					
1. The Commissioner is hereby authorized to charge		Entit		Entit		
Deposit Lagrange and credit any over payment to:	Larg eFee Code	yFee (\$)	Larg eFee Code	yFee (\$)	Fee Description F	ee Paid
Account 12-2232 Number	105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account LSI LOGIC CORPORATION	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
Number	139	130	139	130	Non-English specification	
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1. BASIC FILING FEE	117	950	217	475	Extension for reply within third mont	
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eFee yFee eFee yFee Fee Description Fee Paid Code (\$) Code (\$)	128	2,060	228	1,030	Extension for reply within fifth mont	
101 790 201 395 Utility filing fee	119	310	219	155	Notice of Appeal	
106 330 206 165 Design filing fee	120	310	220	155	Filing a brief in support of an appea	
107 540 207 270 Plant filing fee	121	270	221	135	Request for oral hearin	
108 790 208 395 Reissue filing fee	138	1,510	138	1,510	Petition to institute a public use proceedin	
114 150 214 75 Provisional Filing fee	140	110	240	55	Petition to revive - unavoidabl	
SUBTOTAL (1) (\$) 0.00	141	1,320	241	660	Petition to revive - unintentional	
2. EXTRA CLAIM FEES	142	1,320	242	660	Utility issue fee (or reissue	1330
Extra Claim Fee from Fee Paid	143	450	243	225	Design issue fe	
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	122	130	122	130	Petitions to the Commissione	-
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Multiple Dependent =	123	50	123	50	Petitions related to provisional application	
**or number previously paid, if greater; For Reissues, see below	126	240	126	240	Submission of Information Disclosure Stm	
Larg Entit Larg Entit eFee yFee eFee yFee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per property (times number of properties)	
103 22 203 11 Claims in excess of 20	146	790	246	395	Filing a submission after final rejection (37 CFR 1.129	
102 82 202 41 Independent claims in excess of 3	149	790	249	395	For each additional invention to be	
104 270 204 135 Multiple dependent claim, if not paid	143	, 50	473	555	examined (37 CFR 1.129 (b))	
109 82 209 41 **Reissue independent claims over original patent	Other f	ee (spe	cify)	PUBLI	ICATION FE	
110 22 210 11 "Reissue claims in excess of 20 and over original patent	Other fee (specify)					
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SUBMITTED BY Complete (if applicable)						
Typed or printed name Sandeep Jaggi					Reg. Number 43,331	
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